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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2013 HAR USROMAM R: 38

FEC FORM 3X

Rev. 12/2004

							HI STOPE VE	e Only	0・3億
1. NAME COMM	OF NITTEE (in full)	TYPE OR PRI	VT ▼	Example: If ty over the lines		12FE41	MSEC MA	IL CEN	4TER
L	LRBAN, F	WGness,	POLITICA	4, ACT	ion Cu	MMITTE			
		1.1.1.1.1.1	1111	<u>.l., l., l., L.</u>	1111				
ADDRESS	(number and street)	L.P.O.	B,0X, Z	2,57,	1111				
V	heck if different				<u>1 </u>			لللثا	
្រឹះ្លឹ th	an previously ported. (ACC)	WALT	ERBOR	9		SC	12,94	-88-1	
2. FEC I	DENTIFICATION	NUMBER 🔻	CITY	A		STATE A		ZIP COD	EA
C (005280	66 l		THIS PORT	NEW (N) OR		AMENDED (A)		
	OF REPORT se One)	(b) Monthly Report	1.2	0 (M2)		ti,rif	ug 20 (M8)		Nov 20 (M11 (Non-Election Year Only)
(a) Q	uarterly Reparts:	. Due on	Mar 20	0 (M3)		i e est Coma	Sep 20 (M9)	. 설년 (1978년	Dec 20 (M12 (Non-Election Year Only)
	April 15 Quarterly Report	(Q1) (c) 12	ita i	O (M4)		 2명	oct 20 (M10) 	\ <u>\</u> \$=#\$	Jan 31 (YE)
Server of the se	July 15 Quarterly Report	(Q2) PF	(E-Election	Conventio		1. 11. 1 1. 11. 1	al (128)	(a)	tulioli (12A)
	October 15 Quarterly Report	ļ	•	12±13	;	1 1111		i- 4b-	Section of the second
	January 31 Year-End Report	(YE)	Election	on 03	19	2013	i i i Isaas	in the State of	SC
	July 31 Mid-Year Report (Non-elec Year Only) (MY)	tion (d) 50	-Day DST-Election	General (30G)	Runo	f (30R)	(71) 1: 21 5	Special (30S)
	Termination Repo		eport for the:	11	/ (***********/		F y N Sel	in the State of	
5. Coveri	ng Period	01/31	2013	through	h 03	1 6	Źŏ	ίž	
L and the Abo	t I have examined	this Donast and	to the heat of m	w Impuladas an	d baliat it is t	nia anunat	and complet	•	
	nt Name of Treasu	00	io ine best of in	L. Muk		rue, correct	and complet	le.	
		•					William Catalon		
Signature o	of Treasurer	Bridge	t mu	tray		Date C	3 1	6	2013
NOTE: Subi	mission of false. ern	oneous, or incomp	olete information	may subject the i	person signing	this Report t	o the penaltic	es of 2 U.	S.C. §437a.

FE6AN026

Office

Use

Only

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SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name PROGRESS POLITICAL ACTION COMMITTEE Report Covering the Period: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period...... Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street; NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

URBAN PROGRESS POLITICAL ACTION COMMITTEE

Report Covering the Period:

()

M 0 M From

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31 201

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
11. Contributions (other than loans) From:				
(a) Individuals/Persons Other	•	•		
Than Political Committees		0000		
(i) Itemized (use Schedule A)				
(ii) Unitemized		, , , , , , , , , , , , , , , ,		
(iii) TOTAL (add	and the first of the contract	2222		
Lines 11(a)(i) and (ii)	, , 0000	, , 00,00		
(h) Political Borty Committees	0000	00.00		
(b) Political Party Committees (c) Other Political Committees				
(such as PACs)		0000		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry	\mathcal{O}	0000		
Totals to Line 33, page 5)				
12. Transfers From Affiliated/Other Party Committees	0000	0000		
. 4.1,	^^^			
13. All Loans Received	ω , $OOOO$, , 0000		
	A2 A2			
14. Loan Repayments Received	ω , ω	, 2000		
15. Offsets To Operating Expenditures				
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	∞	0000		
16. Refunds of Contributions Made				
to Federal Candidates and Other				
Political Committees	. , 0000	$, , \infty $		
17. Other Federal Receipts	$\sim \sim \sim \sim$	\mathcal{O}		
(Dividends, Interest, etc.)		, , ,		
(a) Non-Federal Account				
(from Schedule H3)	0000	, $OOOO$		
	2020	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
(b) Levin Funds (from Schedule H5)	, 0000	, 000		
	AAAA	\sim		
(c) Total Transfers (add 18(a) and 18(b))				
19. Total Receipts (add Lines 11(d),		2020		
12, 13, 14, 15, 16, 17, and 18(c))		, , , , , ,		
20. Total Federal Receipts		en e		
(subtract Line 18(c) from Line 19)	0000	0000		

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Page 3

M

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A	COLUMN B		
21.	Operating Expenditures:	Total This Period	Calendar Year-to-Date		
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		The presence of the control of the c		
	(i) Federal Share	00.00	, 0000		
	(ii) Non-Federal Share	0000	, , , , , , , , , , , , , , , , , , , ,		
	(b) Other Federal Operating Expenditures	000	0000		
	(c) Total Operating Expenditures		 (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		
	(add 21(a)(i), (a)(ii), and (b)) ▶	0000	, 0000		
22.	Transfers to Affiliated/Other Party Committees	0000	00.00		
23.	Contributions to Federal Candidates/Committees				
	and Other Political Committees	, , , , , , , , , , , , , , , , , , , ,	, 00.00		
24.	Independent Expenditures	α	00.00		
25.	(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d))				
	(use Schedule F)		, 0000		
26	Lean Repayments Maide	00.00	0000		
20.	Luan riepayments wade		 A method for a Monatan care of traction in a care of the comment of		
27.	Loans Made Refunds of Contributions To:		, , , , , , , , , , , , , , , , , , , ,		
20.	(a) Individuals/Persons Other Than Political Committees	000)	0000		
	man i omogi commisso minimi	7 7 7 7			
	(b) Political Party Committees				
	(c) Other Political Committees (such as PACs)	0000	0000		
	(655.1 25 7 7 65)	of realise the Profile of FC. In the first stable !	The trade of the state of the first and the state of the		
	(d) Total Contribution Refunds	OOOO	$\Delta \Delta \Delta \Delta$		
	(add Lines 28(a), (b), and (c))▶				
29.	Other Disbursements	, 00.00	, 0000		
30.	Federal Election Activity (2 U.S.C. §431(20))				
	(a) Allocated Federal Election Activity (from Schedule H6)	ing and a subject of the subject of	ann o chair seach mainte da Albana an An Each		
	(i) Federal Share	, 00.00	, 0000		
		000	W000		
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely				
	With Federal Funds	$\mathcal{O}\mathcal{O}\mathcal{O}$, 0000		
	(c) Total Federal Election Activity (add	000	0000		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	Locari Transila - เรียกละเปิดตรง Transil Transil ละเปิดตรง เกิดเรียก	There is the second of the sec		
31.	Total Disbursements (add Lines 21(c), 22,				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))				
32.	Total Federal Disbursements				
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		0000		
	from Line 31)				
		•.			

(subtract Line 37 from Line 36)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 **COLUMN A COLUMN B** III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 37. Offsets to Operating Expenditures (frem Line 15, page 3)..... 38. Net Operating Expenditures

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE OF
TEMIZED RECEIPTS	Use separate schedule(s) tor each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and	Statements may not be sold or used by any per	son for the number of soliciting contributions
r for commercial purposes, other than using t	he name and address of any political committee.	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	ress Political Comm	
	1853 POLITICAL COMM	
Full Name (Last, First, Middle Initial)		
Mailing Address	:	Date of Receipt
· 		
City	State Zip Code	
FEC ID number of contributing	<u> </u>	Amount of Each Receipt this Period
federal political committee.	C 4	, , .
Name of Employer	Occupation	1
	<u> </u>	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	. "	
hand the second	, , ,	
Full Name (Last, First, Middle Initial)		
Mailing Address		Date of Receipt
	Contract to the second	
City	State : Zip Code ;	
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	, , ,
Name of Employer	Occupation	
	.,	
Receipt For: Primary General	Aggregate Year-to-Date ▼	·
Other (specify)		
	, , ,	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		, a m / O D / Y Y Y Y
	Chata Tim Code	
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing	С	The state of the s
federal politimal committee.	C	, ,
Name of Employer	Occupation	
Declar For:	1	
Receipt For: Primary General	Aggregate Year-to-Date ▼	,
Other (specify)	,	·-
	<u> </u>	L
SUBTOTAL of Receipts This Page (optional)		00,00
		, , 0000
OTAL This Period (last page this line number	r only) 🍗	

				·	
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	1 the annual state of POF			PAGE OF	
	Detailed Summary Page	21b 27	28a 28b	24 25 28c 29	26 30
Any information copied from such Reports and State of for commercial purposes, other than using the n	tements may not be sold or use name and address of any politica	d by any pers I <u>committee</u> to	ion for the purpose or o solicit contributions	f soliciting contribution such commit	rtions .
NAME OF COMMITTEE (IN FUI) URBAN PROGRES		t ⁻			
Full Name (Last, First, Middle Initial) A.		-	Data at Dist		
~·	·.		Date of Disburser	nent Prvvv	٧
Mailing Address			•		
City	State Zip Code				
Purpose of Disbursement			Amount of Each [Nobeles and the	Davis d
Candidate Name		Category/ Type	, n		Penoa
Office Sought: House Disburs	sement For:	.уро	. 1		
President State: District:	Other (specify)	U			
Full Name (Last, First, Middle Initial) B.		4	Date of Disbursen	nort	-
		·	m w / o m		Y
Mailing Address		,			
City	State Zip Code	7			
Purpose of Distragement		*	Amount of Each C	Disbursement this	Period
Candidate Name	•	Category/	·	,	
Senate	ement For: Primary General				
President State: District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
C .			Date of Disbursen	nent , , v , v	V
Mailing Address			, ,	, , , , ,	•
City	State Zip Code				
Purpose of Disbursement					
Candidate Name		Category/	Amount of Each D	Disbursement this I	Period
Office Sought: House Disburs	sement For: Primary General	Туре	ξ,	, .	•
President State: District:	Other (specify)		. ***	•	

0000

SUBTOTAL of Disbursements This Page (optional)...

TOTAL This Period (last page this line number only).....

SCHEDULE C (FEC Form 3X) OANS		Use separațe schedule(s)	PAGE	OF
		for each category of the Detailed Summary Page	FOR LINE 1	3 OF FORM 3X
HAME OF COMMITTEE (In Full) URBAN PROGRESS		ETION COMA	ાઇસ	
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		Election:	
	•		Primary	ı
No. III and Address			General	
Mailing Address	· ·	· ·	Other (specify)	▼ .
City	State ZIP Cod	le	<u> </u>	
Original Amount of Loan	Cumulative Payment To		ce Outstanding at C	lose of This Period
ر ا	January , Lyman 19			
, , , ,	- ;	1	, ,	,
TERMS Date Incurred	Date Due	Interest Rate		Secured:
	u v o o o b 🧎 v	$\gamma = \gamma = \gamma$	•	
		•	% (apr)	Yes No
List All Endorsers or Guarantors (if any) to	o Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		IF		
		Amount		
City State	ZIP Code	Guaranteed Outstanding: 1	, ,	
2. Full Name (Last, First, Middle Initial)		Name of Employer		· · · · · · · · · · · · · · · · · · ·
2. Pull Haine (Last, First, Middle Hillar)				
Mailing Address	· .	Occupation		
		*		
	7000-2-	Amount Guaranteed		
Gity State	ZIP Code		;	• •
3. Full Name (Last, First, Middle Initial)	1,	Name of Employer	· · · · · · · · · · · · · · · · · · ·	
Mailing Address		Occupation		
			·	
City State	ZIP Code	Amount Guaranteed	-	
City State	Zii Code		5 ,	•
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
·		Amount		
City State	ZIP Code	Guaranteed	, ,	•
<u> </u>				
Assemble Till B. I. L. T. B. C. Cont. o. B.		_	`\$	<u>አ</u> ስስለ
SUBTOTALS This Period This Page (optional)			, ,	20,00
TOTALS This Period (last page in this line onl	y)		, ,	00.00
Carry outstanding balance only to LINE 3, Sci	hedule D, for this line. If	no Schedule D, carry forwa	ard to appropriate	line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

receral Election Commission, Washington, D.C. 20463	<u> </u>	
NAME OF COMMITTEE (In Full)	F	FEC IDENTIFICATION NUMBER
URBAN PROGRES POLITICA	R PRTION COMMITT	E C00528661
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR)
Mailing Address	: Date incurred or Established	
City State Zip Code	Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurred	
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	
C. Are other parties secondarily liable for the debt incurre No Yes (Endorsers and guarantors mu	ed? est be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the laproperty, goods, negotiable instruments, certificates ef stocks, accounts receivable, cash on deposit, or other	deposit, chattel papers, similar traditional collateral?	What is the value of this collateral?
No Yes If yes, specify:		Does the lender have a perfected security
E. Are any future contributions or future receipts of interest collateral for the loan? Ne Yes If yes, s		What is the estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Locotion of account:	•
Date account established:	Address:	
	City, State, Zip:	
F. If neither of the types of collateral described above was the loan amount, state the basis upon which this loan	s pledged for this loan, or if the a was made and the basis on which	mount pledged does not equal or exceed the it assures repayment.
G. COMMITTEE TREASURER Typed Name Signature		DATE
H. Attach a signed copy of the loan agreement.		
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terare accurate as stated above. II. The loan was made on terms and conditions (incominal extensions of credit to other borrowers of III. This institution is aware of the requirement that a grapplied with the requirements sat torth at 11 Cl	cluding interest rate) no more favo comparable credit worthiness. a loan must be made on a basis	prable at the time than those imposed for which assures repayment, and has
AUTHORIZED REPRESENTATIVE		DATE
Typed Name Signature Titl	e .	
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з,

HEDULE D (FEC Form 3X) BTS AND OBLIGATIONS cluding Loans	, s	se separate chedule(s) for each nbered line)	FOR LINE NUM (check only one	
ME OF COMMITTEE (IN FULL) URBAN PROGRESS POLITICA	92 ACTION	Commi	TTEE	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	· · · · · · · · · · · · · · · · · · ·	•	ebt (Purpose):	
	. [•	•
Mailing Address		1		
City State Zip Code	···-		P	
Outstanding Balance Beginning This Period	· · · · · · · · · · · · · · · · · · ·	L		
Amount incurred This Period Payme	ent This Period	Outstandi	ng Balance at Clos	e of This Peri
	, .		3 · 3	•
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):	
	И			
Mailing Address	a a			
City State Zip Code	·			
Outstanding Balance Beginning This Period				
Amount Incurred This Period Payme	ent This Period .	Outstandi	ng Balance at Clos	e of This Peri
	, P		3 -	•
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):	
		Į		
Mailing Address				
City State	Zip Code		٠,	
Outstanding Balance Beginning This Period		 		
Amount Incurred This Period Payme	ent This Period	Outstandi	ng Balance at Clos	e of This Peri
tangan sa			ak a satt.	an established
SUBTOTALS This Period This Page (optional)	>		te de la companya de	3000
TOTALS This Period (last page this line number only)			a de la composición del composición del composición del composición de la composición de la composición del composi	0000
TOTAL OUTSTANDING LOANS from Schedule C (last page only) >		eren ja and green en en errote and e	0000
ADD 2) and 3) and carry forward to appropriate line of Summary				0000

•::.

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UR BAN PROGRESS POLITICAL ACTION Committee COOS 28 6 C Check if 24-hour report 48-hour report New report Amends report filed on Full Name (Last, First, Middle Initial) of Payee Date Mailing Address Amount City State Zip Code Purpose of Expenditure Category/ Type Check One: Support Office Sought Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Support Opposed Calendar Year-To-Date Per Election for Office Sought Full Name (Last, First, Middle Initial) of Payee Date Mailing Address Date Mailing Address Date Category/ Type Coffice Sought House State: Amount City State Zip Code Purpose of Expenditure Category/ Type Senate District: Coffice Sought House State: Amount City State Zip Code Purpose of Expenditure Category/ Type Senate District: Committee Committee Category/ Type Coffice Sought House State: Committee Category/ Type Coffice Sought House Category/ Type Coffice Sought Co	м зх
Check if 24-hour report 48-hour report	R▼
Full Name (Last, First, Middle Initial) of Payee Mailing Address	
Mailing Address Amount City State Zip Code Amount City State Zip Code Category/ Type Senate District: President Check One: Support Opposed by Expenditure: Calendar Year-To-Date Per Electron for Office Sought Full Name (Last, First, Middle Initial) of Payee Mailing Address Amount City State Zip Code Category/ Category/ Category/ Full Name (Last, First, Middle Initial) of Payee Category/	Andrew Andrew
Mailing Address Amount City State Zip Code Category/ Type Category Category Category Type Category Category Category Category Category Category	
City State Zip Code Purpose of Expenditure Category/ Type C	
Purpose of Expenditure Category/ Type	1
Name of Federal Candidate Supported or Opposed by Expenditure: Check One: Support Opposed Calendar Year-To-Date Per Election for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Mailing Address Amount City State Zip Code Category/ Furpose of Expenditure Category/ Time Category/	
Full Name (Last, First, Middle Initial) of Payee Date Mailing Address City State Zip Code Category/ Time Category/ Time Category/ Ca	 se
Mailing Address City State Zip Code Category/ Category/ Coffice Sought: House State:	rali
City State Zip Code Purpose of Expenditure Category/ Time Sought: House State:	T2 ¥ 1.5
Purpose of Expenditure Category/ Time Category/ Cate	e Personal P
Purpose of Experiorities Category/	ab (medi
Name of Federal Candidate Supported or Opposed by Expenditure: Check One: President Check One: Opposed Opp	Se
Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary General Other (specify)	r al
(a) SUBTOTAL of Itemized Independent Expenditures.) O
(b) SUBTOTAL of Uniternized Independent Expenditures	00
(c) TOTAL Independent Expenditures)()
Under penalty of perjury 1 certify that the independent expenditures reported herein were not made in cooperation, consultation, or conwith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a polyparty committee) any political party committee or its agent.	
Signature Date 03 16 2013	

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENTICAL

					 	
ON BEHALF OF CANDIDAT	ES FOR FE	DERAL OFFIC	E		PAGE	OF
2 U.S.C. §441a(d))	(To be used ont	y by Political Con	nmittees in the (General Election)	FOR LINE 25	OF FORM 3X
NAME OF COMMITTEE (IA Full)		· · · · · · · · · · · · · · · · · · ·		T_	·	•
URBAN PROC	sness f			COMMITTE	Æ .	
Has your committee been designated t		Full Name of Sul	bordinate Commi	ttbe		
coordinated expenditures by a political YES NO	party committee?					
YES, name the designating committee	16 :	Mailing Address				
، د		City	. —	Sta	ite ZIP C	ode
Full Name (Last, First, Middle Initia	l) of Each Payee			Purpose of Exp	enditure	
	. 13			1		
Mailing Address		<u> </u>				Category/
Washing Address				Date .		Туре
City *	State	Zip Code		v v	e e v v s	
Name of Federal Candidate Support	nted Office Soug	ht: House	State:	Amount		
	į	Senate	District:			
		Presidentia	g (,	•
Aggregate General Election Expenditure for this Candidate ▶.						
Full Name (Last, First, Middle Initia	N of Each Payee		,	Purpose of Expe	enditure	
	,,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		,		·
Mailing Address			·			Category/
				Date		······································
City	State	Zip Code		, A	e di r	
Name of Federal Candidate Suppor	ted Office Soug	ht: House	State:	Amount		
		Senate	District:	_		
		Presidentia	<u> </u>		,	
Aggregate General Election Expenditure for this Candidate	7	4				
Full Name (Last, First, Middle Initia) of Each Pavee		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Purpose of Exp	anditure	
	•	• -	•			
				`·		Category/
Mailing Address				Date		Туре
City	State	Zip Code		# 45 · ·	ץ אַ סכס	
Name of Federal Candidate Support	rted Office Soug	ht: House	State:	- Amount		
·		Senate Presidentia	District:	_	•	
Aggregate General Election	<u></u>				•	• • • • •
Expenditure for this Candidate	2			7,		
SUBTOTAL of Expenditures This Page	e (optional)	: :		.		0000
				- ′	•	1000
TOTAL This Period (last page this line	number only)	***************************************		> ,	, (

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

ME OF	COMMITTEE (In Full)				
l	IRBAN PRO	GRESS	POLITICAL.	ACTION	CommiTTEE
		USE	ONLY ONE S	SECTION,	A or B
A. S	State and Loca	ıl Party	Committees		
•	Fixed Percentage	(select on	e) .		4
		-	•		ž.
	Presidentia	al-Only Elect	tion Year (28% Fe	deral)	**
	Presidentia	al and Sena	te Election Year (3	36% Federal)	
	,		Year (21% Federa		
			·		
,	Non-Presid	dential and i	Non-Senate Election	on Year (15%	Federal)
•			· · · · · · · · · · · · · · · · · · ·		<u>:</u> -
		•	··		
B. \$	Separate Segre	egated F	unds and N	onconne	cted Committees
	Flat Minimum Fed	ierai Percer	ntage		
	If the committee w	ill allocate u	sing the flat minin	num percentaç	ge of 50% federal funds, check
	If the committee is	spending m	nore than 50% fed	eral funds, in	dicate ratio below
	Federal			······································	
	Nonfeder	al			
	This ratio applies t	o (check all	that apply):		
	Administrative	Generi	c Voter Drive	Public C	communications Referencing Party Only
		:			· ·

SCHEDULE H2 (FEC Farm 3X)

ALLOCATION RATIOS

PAGE (

NAME OF COMMITTEE	(In Full)			
URBAN	PRIGRESS	POLITICAL	BETION	COMMITTEE

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

are allocated using a time/space metrod.		
ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
Fundraising Direct Candidate Support	o _c	š.,
CHECK IF THE RATIO IS:] " [•
New Revised Same as Previously Reported	¥	
ACTIVITY OR EVENT IDENTIFIER		
	# FEDERAL %	NONFEDERAL %
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CHECK IF THE RATIO IS: New Revised Same as Previously Reported	† 1	
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ACTIVITY OR EVENT IDENTIFIER	 	
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	,	
Fundraising Direct Candidate Support	1	
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New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER		·
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CHECK IF THE RATIO IS:	**.	
New Revised Same as Previously Reported		
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ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
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Fundraising Direct Candidate Support	9.1	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
CHECK IF THE RATIO IS:	,	
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1484 Healen Calle 89 Licalonal Hebotica		·,
ACTIVITY OR EVENT IDENTIFIER		
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ACTIVITY IS: Fundraising Direct Candidate Support	5. I	
ACTIVITY IS: Fundraising Direct Candidate Support	W.	i i
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	%.	Ye.

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NORFEDERAL ACTIVITY

PAGE OF FORM 1

ME OF COMMITTEE (In Full)		FOR LINE 18a OF FORM
_	POLITICAL ACTION COM	MITTEE
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
	AMANGA Spannis V Avanahas	3330
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PREAKDOWN OF TRANSFER RECEIVED	4	
i) Total Administrative		0000
Di Granda Mater Datas		
II) Generic Voter Drive		
H) Exempt Activities		000 0
iv) Direct Fundralaing (List Activity or Event	(dentifier)	Secretaria de la Recolaria de tante de la color de la
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a)	- In the second	**************************************
	grander som samme som interest i springer	•
b)	— The sets of the discountry of the considerable of the second of the considerable of the second of	
c) Total Amount Transferred For Direct Fun	draising	0000
v) Direct Candidate Support (List Activity or		general and a sign of defending the later sample in the substitution in the later with the continuence of th
of the section of the	The second secon	
a)		terrores and the second
	Regiment accepture and the control of the control of second secon	e de la companya de l
* (b)	— Burasa, autori pomiar a some demokrasidoristi in blu	To B
c) Total Amount Transferred For Direct Car	rdidate Support	0000
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vi) Public Communications Referring Only	to Party (Made by PAC)	Energia en troma komo la mala mala mala mala mala mala mal
TOTALS	FOR BREAKDOWN OF TRANSFER RECEIVE	ED =
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AL This Period (Generic Voter Drive)	a Reconstruction of the Control of t	0000
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AL This Period (Exemps Activities)		rations that it there is no state at the continuent
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AL This Period (Direct Candidate Support)		2 0000
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AL This Period (Public Communications Referri	ing Only to Party)	rak para (Sara Wari di marikan di Wanadhara pharaidh na dheandh
AL This Period (Total Amount Transferred)	•	0000
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SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR	IME	21.	ΛE	FORM	2
		<u>: </u>			
PAGE		C	F		

NI/	TME OF COMMITTEE (In Full)			FOR LINE 21a OF FORM 3
146	URBAN PROGRE	ss Poutic	or Actio	ON COMMITTEE
A.	Full Name (Last, First, Middle Initial)	2.		Allocated Activity or Event:
				Administrative Fundraising Exempt
	Mailing Address			Voter Drive Direct Candidate Support
	City State	Zip Code		Public Comm (ref to party only) by PAC
		<u></u>		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:			2220
	Activity or Event Identifier:			, , 0000
	•	- ·	Category/	M M / O O / Y Y Y
		<u> </u>	Туре	Date
	FEDERAL SHARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
				0000
	- 1	, ;		, , , , , , , , , , , , , , , , , , , ,
	Full Name (Last, First, Middle Initial)	,		Allocated Activity or Event: Administrative Fundraising Exempt
	Mailing Address			
٠,				Voter Drive Direct Candidate Support
	City State	Zip Code		Public Comm (ref to party only) by PAC
•	Purpose of Disbursement:			Allocated Activity or Event Year-To-Date
			• ••	$ \cdot $, 0000
	Activity or Event Identifier:	•	Category/	F 8 50 / D D / Y Y Y
			Type	Date
	FEDERAL SHARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
		•		
	•	1 ; 2	•	, ,
,	Full Name (Last, First, Middle Initial)	4.		Allocated Activity or Event:
	Adalis - Address			Administrative Fundraising Exempt
	Mailing Address			Voter Drive Direct Candidate Support
•	City State	Zip Code		Public Comm_(ref to party only) by PAC
	2	· .		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:	:		0000
٠	Activity or Event Identifier:			, , , , , ,
			.Category/ Type	Date
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•	FEDERAL SHARE +	NONFEDERAL		= TOTAL AMOUNT
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SU	, ,	, ,	SHARE	= TOTAL AMOUNT
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	BTOTAL of Allocated Federal and NonFederal Activity FEDERAL SHARE + , , , TAL This Period (last page for each line only)(Federal	This Page NONFEDERAL , share to 21(a)(i) and	SHARE SHARE NonFederal sh	TOTAL AMOUNT TOTAL AMOUNT TOTAL AMOUNT OOCO
	BTOTAL of Allocated Federal and NonFederal Activity FEDERAL SHARE +	This Page NONFEDERAL	SHARE SHARE NonFederal sh	TOTAL AMOUNT TOTAL AMOUNT TOTAL AMOUNT

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE OF

	· · · · · · · · · · · · · · · · · · ·	FOR LINE 180 OF FORM 3
AME OF COMMITTEE (In Full)	- 0.	A -
URBAN PROGRESS	s Political Action	COMMITTEE.
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
•	ta ta : p p / y y y	2222
		, 0000
	<u> </u>	<u> </u>
BREAKDOWN OF THIS TRANSFER		:
i) Yoter Registration	VOTER REGISTR	RATION
Total Amount Transferred for Vote	r Registration , , , , ,	,
	· ·	OTER ID
; II) Voter ID Total Amount Transferred for Vote	v ID	
iotal Allioust Transiested for York	,	
III) GOTV	•	GOTV
Total Amount Transferred for GOT	V	
	. A	GENERIC CAMPAIGN ACTIVITY
iv) Generic Campaign Activity Total Amount Transferred by Gen	eric Campaign Activity	
Iolai Amount maisiemad nei Gen		, , , , , , , , , , , , , , , , , , ,
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT THANSPERRED
		, , 0000
BREAKDOWN OF THIS TRANSFER		,
i) Voter Registration	VOTER REGISTI	RATION
Total Amount Transferred for Vote	er Registration	
· w		OTER ID
(i) Voter ID		
Total Amount Transferred for Vote	# 1D,	, .
III GOTV		GOTV
	TV	
		GENERIC CAMPAIGN ACTIVITY
iv) Generic Campaign Activity		
Total Amount Transferred for Gen	eric Campaign Activity	, ,
TOTALS FOR B	REAKDOWN OF TRANSFER RECEIVED (L	ast Page Only)
TOTAL This Provid (Voter Registration)		0000
•	, ,	
TOTAL This Period (Voter ID)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0000
·	,	
TOTAL This Period (GOTV)	***************************************	0000
		ing the part of the second of
TOTAL This Period (Generic Campaign	Activity)	0000
taine ine came faminis sampage.		magair an
TOTAL This Paried (Total Amount of Yes	nsfers Received)	0000
. IVIAL THE FORM (TOWN AMOUNT OF THE	···	
	4.	•

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY (To be used by State, District and Local Party Committees Only)

OF FOR LINE 30a OF FORM 3X

PAGE

URBAN PROGRESS POLITICAL ACTION CO. A. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOT\ Voter ID Generic Camp
Mailing Address	. Allocated Activity or Event Year-To-Date
City State Zip Code	, , , , , , ,
Purpose of Disbursement Category/ Type	Date
FEDERAL SHARE + LEVIN SHARE	= TOTAL AMOUNT
en e	000
B. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOTV Generic Carny
Malling Address	Allocated Activity or Event Year-To-Date
City State Zip Code	, 00,00
Purpose of Disbursement Cotagonal	5 M + D D + X X X
i Category	Date
FEDERAL SHARE + LEVIN SHARE	
Type	Date
FEDERAL SHARE + LEVIN SHARE	Date TOTAL AMOUNT Type of Allocated Activity or Event:
FEDERAL SHARE + LEVIN SHARE	Type of Allocated Activity or Everit: Voter Registration Once The Control of Control o
FEDERAL SHARE + LEVIN SHARE , , , , , , , , , , , , , , , , , , ,	Type of Allocated Activity or Everit: Voter Registration One of Allocated Activity or Everit:
FEDERAL SHARE + LEVIN SHARE C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address	Type of Allocated Activity or Event: Voter Registration Voter ID Generic Camp
FEDERAL SHARE + LEVIN SHARE C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date , , , ,
FEDERAL SHARE + LEVIN SHARE C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement Category/	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date , , , , , , , , , , , , , , , , , , ,
FEDERAL SHARE + LEVIN SHARE C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement Category/ Type	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date , , , , , , , , , , , , , , , , , , ,
FEDERAL SHARE + LEVIN SHARE C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement Category/ Type FEDERAL SHARE + LEVIN SHARE	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date , , , , , , , , , , , , , , , , , , ,
FEDERAL SHARE + LEVIN SHARE C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement Category/ Type FEDERAL SHARE + LEVIN SHARE	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date , , , , , , , , , , , , , , , , , , ,
FEDERAL SHARE + LEVIN SHARE C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement Category/ Type FEDERAL SHARE + LEVIN SHARE 3	Date Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT TOTAL AMOUNT
FEDERAL SHARE + LEVIN SHARE C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement Category/ Type FEDERAL SHARE + LEVIN SHARE 3 TOTAL of Shared Federal and Levin Activity This Page FEDERAL SHARE + LEVIN SHARE 4 TOTAL SHARE + LEVIN SHARE	Date Total Amount Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date Total Amount Total Amount Total Amount
FEDERAL SHARE + LEVIN SHARE C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address City State Zip Code Purpose of Disbursement Category/ Type FEDERAL SHARE + LEVIN SHARE , , , , , , , , , , , , , , , , , , ,	Type of Allocated Activity or Event: Voter Registration Voter ID Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT TOTAL AMOUNT 30(a)(ii))

SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

NAM	E OF COMMITTEE (In Full) URBAN PWGA655 (*	POLITICAL ACTION COMMI	TTEE
NAM	E OF ACCOUNT	ř	•
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS (a) Itemized		2000
	(b) Unitemized	0000	0000
•	(c) Total		0000
2.	OTHER RECEIPTS	0000	
3.	TOTAL RECEIPTS		Cooper Constitution of the
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT	•	
•	(Use Schedule L-S) (a) Voter Registration	<u>000</u>	
	(b) Voter ID		
	(c) GOTV	000	
	(d) Generic Campaign		
	(e) Total		The second secon
5.	OTHER DISBURSEMENTS	and the state of t	The state of the self was the explanation and the state of the self was the self wa
D. ·	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	The market and a state of the advantage of the state of the anti-	The contraction of the contract of the contrac
7. .	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	OOO	· han show down the manufacture of the school of the schoo
8.	RECEIPTS(trem Line 8)	POOD	general and the second
9.	SUBTOTAL(Add Lines 7 and 8)		g an experience of the control of th
0.	DISBURSEMENTS	O O O	garange en en grangse en ege en trage en eg en en grang fra en en grangse en en En en
11.	ENDING CASH ON HAND	2000	
	Communication in a library plant of communication		

ITEMIZED RECEIPTS OF LEVIN FUNDS

SCHEDULE L-A (FEC Form 3X) PAGE OF Use separate schedule(s) for each category of the FOR LINE NUMBER: Aggregation Page (check only one) Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) PROGRESS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt B. Mailing Address Amount of Each Receipt this Period Zip Code 00 00 Aggregate Year-to-Date Occupation 0000 Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt Mailing Address Amount of Each Receipt this Period Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Mailing Address Amount of Each Receipt this Period City Zip Code 00 00 Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation SUBTOTAL of Receipts This Page (optional).......

TOTAL This Period (last page this line number only)....

SCHEDULE L-B (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMB	PAG	E		OF
(check only one)	4a : 4b		4c 4d	<u></u> 5

OF LEVIN FUNDS	for each category of the Aggregation Page	(check only one) 4a 4c 5
Any information copied from such Reports and Statements may n or for commercial purposes, other than using the name and address.	ot be sold or used by any perso ass of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
WRE OF COMMITTEE (IN FUIL) URBAN PROGRESS PULITION	ACTION COMMIT	TEE :
Full Name (Last, First, Middle Initial) / Full Organization Name A.		Date of Disbursement
Mailing Address		· · · · · · · · · · · · · · · · · · ·
City J State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		, , 00,00
Full Name (Last, First, Middle Initial) / Full Organization Name 3.		Date of Disbursement
Mailing Address	И	
City State Purpose of Disbursement	Zip Code	Amount of Each Disbursement this Period
Full Name (Last, First, Middle Initial) / Full-Organization Name		Date of Disbursement
Mailing Address		M W r O O V v v v
City State,	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	,	, 0000
Full Name (Last, First, Middle Initial) / Full Organization Name).		Date of Disbursement
Mailing Address		•
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	·	, , 00,00
Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Disbursement
Mailing Address		Maria Ma
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	:	, , 0000
SUBTOTAL of Disbursements This Page (optional)	>	0000
TOTAL This Period (last page this line number only)	``	0000

(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** 3/16/13 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED **PREPARER**